

Zoning Board of Adjustment Town of North Hampton

Criteria For Inclusion On Agenda

| Date: | Building Inspector: | Richard Mabey |
|-----------------------------------------|---------------------------------------|-----------------------------------|
| Applicant: | Address: | |
| Phone Number/s: | | |
| Owner of Property: | Address | s: |
| Location of Property: | | |
| Tax Map/Lot #: | Zoning | District: |
| Zoning Board Meeting Date | Cut Off | Date |
| The following items are <u>required</u> | red on or before the cut off date fo | or the Zoning Board of Adjustment |
| List of Abutters, 2 sets | of Avery 5160 labels with verified | and correct mailing addresses |
| Site Plan, to include bu | ut not limited to: | |
| Lot lines | | |
| Existing structur | res | |
| Septic system | | |
| Leach field | | |
| Well locations | | |
| Size of property | / | |
| Total frontage | | |
| Wetlands and b | ouffers | |
| Set backs | | |
| Explanation of Special requested | l Exception, Variance. Equitable W | /aiver or Appeal specifics |
| All fees paid | | |
| Application in office by | v end of business on the cut off list | |

All other issues to be discussed at the Zoning Board of Adjustments must be submitted in writing on or before the cut off date.